

IN THE CLAIMS (Clean Sheet)

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11. (Twice) A method for preventing clotting in an extracorporeal blood circuit of a patient undergoing extracorporeal blood treatment comprising administering for each treatment to the patient or to the circuit 0.001 to 10 mg of methyl O-(3,4-di-O-methyl-2,6-di-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(3-O-methyl-2-O-sulpho- $\beta$ -D-glucopyranosyl uronic acid)-(1 $\rightarrow$ 4)-O-(2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(3-O-methyl-2-O-sulpho- $\alpha$ -L-idopyranosyl uronic acid)-(1 $\rightarrow$ 4)-2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranoside or a salt thereof per kg body weight of the patient.

12. (twice) A method for preventing clotting in an extracorporeal blood circuit of a patient undergoing extracorporeal blood treatment comprising administering for each treatment to the patient or to the circuit 0.30 to 30 mg of methyl O-(3,4-di-O-methyl-2,6-di-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(3-O-methyl-2-O-sulpho- $\beta$ -D-glucopyranosyl uronic acid)-(1 $\rightarrow$ 4)-O-(2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(3-O-methyl-2-O-sulpho- $\alpha$ -L-idopyranosyl uronic acid)-(1 $\rightarrow$ 4)-2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranoside or a salt thereof.

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15. (twice) A method for preventing clotting in an extracorporeal blood circuit of a patient undergoing extracorporeal blood treatment comprising administering for each treatment to the

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patient or to the circuit 0.001 to 10 mg of methyl O-(2,3,4-tri-O-methyl-6-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(2,3-di-O-methyl- $\beta$ -D-glucopyranosyl uronic acid)-(1 $\rightarrow$ 4)-O-(2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(2,3-di-O-methyl- $\alpha$ -L-idopyranosyl uronic acid)-(1 $\rightarrow$ 4)-2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranoside or a salt thereof per kg body weight of the patient.

16. (twice) A method for preventing clotting in an extracorporeal blood circuit of a patient undergoing extracorporeal blood treatment comprising administering for each treatment to the patient or to the circuit 0.30 to 30 mg of a methyl O-(2,3,4-tri-O-methyl-6-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(2,3-di-O-methyl- $\beta$ -D-glucopyranosyl uronic acid)-(1 $\rightarrow$ 4)-O-(2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranosyl)-(1 $\rightarrow$ 4)-O-(2,3-di-O-methyl- $\alpha$ -L-idopyranosyl uronic acid)-(1 $\rightarrow$ 4)-2,3,6-tri-O-sulpho- $\alpha$ -D-glucopyranoside or a salt thereof.

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Cont.

REMARKS

In the Office Action of June 25, 2002, the Examiner rejected claims 11-18 under 35 U.S.C. §103 (a) for being obvious over Petitou et al. The Examiner concluded that the glycosaminoglycanoid derivatives of heparin disclosed by Petitou et al. include the pentasaccharides used in the presently claimed methods and Petitou et al. taught that they have antithrombotic activity and can be administered enterally or parenterally as